FORM D



UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

OMB Number Expires: April 30,2008 Estimated average burden hours per response.....16,00

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. UNIFORM L

SECTION 4(6), AND/OR	DATE RECEIVED
UNIFORM LIMITED OFFERING EXEMP	TION
Name of Offering (check if this is an amendment and name has changed, and indicate change.) Series B Round (Common Stock)	RECEIVED
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	DEC 2 0 2007 PROCESSED
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	DEC 2 8 2007
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Multi-Factor Authentication, Inc.	THOMSON
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area (1902) CIAL
8965 Research Dr., Irvine, CA 92618	00-414-0218
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	
Provider of browser-based tokenless user authentication enterprise solution.	
Type of Business Organization Corporation Ilimited partnership, already formed business trust limited partnership, to be formed	ase specify):
Month Year Actual or Estimated Date of Incorporation or Organization: 110 015 ✓ Actual ☐ Estima	

NIV

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

CN for Canada; FN for other foreign jurisdiction)

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

A THE PERSON OF	V. (1)		STCAPPENTH	MGÁTION DATA			
2. Enter the information re	·	₹					
	he issuer, if the iss						
							ss of equity securities of the issuer
				tate Sencial and ma	inaging partner	s of partn	ership issuers; and
 Each general and n 	nanaging partner o	f partnership issu	crs.				
Check Box(es) that Apply:	Promoter	Beneficial	Owner 🔽	Executive Officer	Directo	or 🔲	General and/or Managing Partner
Full Name (Last name first, i	f individual)				· · · · · · · · · · · · · · · · · · ·	 	
Business or Residence Addre 8965 Research Drive, In		Street, City, State	, Zip Code)				
Check Box(cs) that Apply:	Promoter	Beneficial	Owner 🛛	Executive Officer	☑ Directe	n 🗌	General and/or Managing Partner
Full Name (Last name first, i	f individual)				J		
Business or Residence Address 8965 Research Drive, Irvi		Street, City, State	, Zip Code)	· · · · · · · · · · · · · · · · · · ·			
Check Box(es) that Apply:	Promoter	Beneficial	Owner Z	Executive Officer	Directo	or 🗀	General and/or Managing Partner
Full Name (Last name first, i Stewart, Thomas C.	f individual)					. ,	
Business or Residence Addre	ss (Númber and	Street, City, State	, Zip Code)				
8965 Research Drive, Irvi	ne, CA 92618						
Check Box(es) that Apply:	Promoter	Beneficial	Owner [Executive Officer	☐ Directe	or 🔲	General and/or Managing Partner
Full Name (Last name first, i Miner, Allen	f individual)				•		
Business or Residence Address "Eblsu Bisiness Tower 1		Street, City, State Shibuya-ku To		13 Japan"			
Check Box(es) that Apply:	Promoter	☐ Beneficial	Owner 🔲	Executive Officer	☐ Directe	or 🗀	General and/or Managing Partner
Full Name (Last name first,	f individual)						
Business or Résidence Addre	ess (Number and	Street, City, State	e; Zip Càdè)				
Check Box(cs) that Apply:	Promoter	Beneficial	Owner _	Executive Officer	Directo	or 🔲	General and/or Managing Partner
Full Name (Last name first,	if individual)				· · · · · · · · · · · · · · · · · · ·	· -	
Business or Residence Addre	iss (Number and	Street, City, State	e, Zip Code)		<u></u>	· · · ·	
Check Box(es) that Apply:	Promoter	Beneficial	Owner [Executive Officer	Direct	or 🔲	General and/or Managing Partner
Full Name (Lastiname first,	if individual)						
Business or Residence Address	ss (Númber and	Street, City,/State	ė, Zip Codė)			· · · · · · · · · · · · · · · · · · ·	
	(Use,bla	nk sheet, or copy	and use addit	ional copies of this	sheet, as neces	sary)	

		mereli.		40	B. B.	FORMAI	ar within	POFFERI	VGIE - A TE	# #		2000	
1. H	as'thé i	ssuer sold	. or does th	e issuer in	itend-to sel	l to non-a	credited i	nvestors in	this offeri	n <i>o</i> 7		Yes	No ₽
			, 0. 0000									L. !	E.
2. W	/hat is t	he mininu	um investm						•		· · · · · · · · · · · · · · · · · · ·	s_2,5	00.00
3. D	oës.the	offering.r	ermit ioint	òwnershii	o of a sine	le unit?				. ,		Yes	No C
4. E	ntër the	diiformati	ion rêdueste	d for eacl	n person w	ho has bee	n or will b	e paid or g	given, diře	ctly or indi	rectly, any		
If	а регво	n to be list	ied is an ass	ociated pe	rson or age	nt of a brok	er or deale	r registered	with the S	EC and/or	with a state	;	
Qt	If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers		i										
	···				, ,						· · · · · · · · · · · · · · · · · · ·		
Ducina	ne or D	ecidence	Address (N	imbar and	Sivert Ci	tu Ctata '7	in Code)						
Dusing	555 OF R	éziaciico.	Maaross (IN	nuokt and	i Streét, Ci	iy, State, Z	ip Code)						
Name	of Asso	ciated Bro	oker or Dea	ler		7"4							
States	in Whi	ch Person	Listed Has	Solicited,	or Intends	to:Solicit-I	urchasers		***				
(0	Check."	All States	" or check!	ndividual	States)	*************						□ Al	States
	\L)	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ĪD.
<u>-</u>		IN		KS	KY	LA	ME	MD	MA	MI.	MN	MS	MO
Has the issue's sold, or does the issue' intend to sell, to non-accredited investors in this offering?	ستست												
Full N	ame (L	ast name.i	first, if Indi	vidual)									
Busine	ess or	Residence	Address (N	lumber an	d Street, C	ity, State, 2	Zip Code)			·			
Näine	of Asse	ciated Br	oker or Dea	lcr		<u> </u>							
States	in Whi	ch Person	Listed Has	Solicited	or Intends	to Solicit I	Purchasers	-				.,	7.00
((Check [.] "	All States	" or check	ndividual	States)	••••••	*************	*************	**********	***************************************		. 🗌 🗛	States
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Full N	lame (L	ast name:	first, if indi	vidual)					<u> </u>		•		
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Name	of Ass	cinted Br	oker or Dea	ılcr'	_								
States	in Wh	ch Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers	 -			1.44		
(4	Check '	All States	or check	individual	States)	**************	, , , , ,		***********		**************	Al	I States
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				_		*							PR

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Dobt	\$	\$
	Equity		
	Common Preferred		
	Convertible Securities (including warrants)	\$	S
	Partnership Interests		
	Other (Specify Units - Common Stock and Warrants)		
	Total		
	Answer also in Appendix, Column 3, if filing under ULOE.	* <u></u>	
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors		s 4,539,827.00
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	m āom i	Type of	Dollar Amount
	Type of Offering	Security	Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		2
	Total		\$ 0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$.1,000.00
	Legal Fees,		s 15,000.00
	Accounting Fees		\$
	Engineering Fees	_ 	\$ <u>·</u>
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify) (Blue Sky Fillings)		\$_1,500.00
	Total		\$ 17,500.00

C OFFERING PRICE, NUMBER OF INVESTIGATE AND USE OF PROGREDS

	C OFFERING PRICE, M	MBEROV INVESTORS EXPENSES AND THE OF	PROCEEDS - TEL	The state of the s
	and total expenses furnished in response to Part C	ffering price given in response to Part C — Question — Question 4.a. This difference is the "adjusted gros	2	\$ 4,522,327.00
5.	each of the purposes shown. If the amount for	proceed to the issuer used or proposed to be used for any purpose is not known, furnish an estimate and of the payments listed must equal the adjusted grospart C — Question 4 b above.	d.	
			Payments to Officers, Directors, & Affiliates	Payments to Others

	Purchase of real estate		<u> </u>	 \$
	Purchase, rental or leasing and installation of r	nachinery		225.000.00
		facilities		
	Acquisition of other businesses (including the		LI3	□3
	offering that may be used in exchange for the a	assets or securities of another		□ \$
	Working capital	***************************************	500,000.00	[7] \$ 2,492,327.00
	Other (specify): Research and Development	t (\$450,000);	200,000.00	1,105,000.00
	Intellectual Property Filings (\$225,000); Sales	s-& Marketing (\$630,000);		
		, man	. [] \$	
	Column Totals	***************************************	\$ 700,000.00	3,822,327.00
	Total Payments Listed (column totals added)	, ,	□ \$ <u>4,</u>	522,327.00
13.	THE THE PARTY OF T	D. PEDERAL SIGNATURE		
igi	nature constitutes an undertaking by the issuer to	the undersigned duly authorized person. If this notice furnish to the U.S. Securities and Exchange Communication investor pursuant to paragraph (b)(2):of	ission, upon writte:	
SS	ucr (Print or Type)	Signature	Dato	
	uiti-Factor Authentication, Inc.	- Mary	12-11-2	007
v a	me of Signer (Print or Type)	Title of Signer (Print or Type)	<u> </u>	
	omas C.,Stewart	Chief Financial Officer		

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

FE	D. SIMIESICNATURE			42.3
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No ⊠	
	See Appendix, Column 5, for state response.			

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239,500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited. Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature		Date
Multi-Factor Authentication, Inc.		;	
Name (Print or Type)	Title (Print or Type)		
Thomas C. Stewart	Chief Financial Officer		

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				A A	PENDEX			e gricing	
1	Intend to non-a investor	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	4 Type of investor and amount purchased in State (Part C-Item 2)					ification ate ULOE attach ation of granted) Item 1)
State	Yes	No		Number.of. Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL			<u> </u>						
AK.									
ΛZ									
, AR			•						
CA		х	Units (C.S./Warr.)	30	\$3,712,327.				×
СО									
СТ									
DE							L		
DC									
FL									
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ID			<u> </u>						
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MN					ļ			<u> </u>	
MS							<u> </u>		

toni-				APP.	ENDIX LIP		1		-
ļ	to non-a	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)					ification te ULOE attach attion of granted) Item 1)
State	Yes	No		Number of Accredited Investors	Amount.	Number of Non-Accredited Investors	Amount	Yes	No
ΜO				·					
МТ									
NE									
NV									
NH									
NJ									
NM									
NY		×	Units (C.S./Warr.)	2	\$75,000.00				×
NC									J
ND									
он									
OK									
OR.									
PA									
RI									
SC									
SD									
TN					`		-		
TX		×	Units (C.S./Warr.)	1	\$2,500.00				×
UT			_						
VT									
VA									
WA									
WY		6							
WI									

1	to non-a	I to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	4 Type of investor and amount purchased in State (Part C-Item 2)				under Sta (if yes, explan- waiver	lification ate ULOE, attach ation of granted)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
WY		×	Units (C.S./Warr.)	1 \$250,000.0					×
PR	· ·								

